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RHMFIUU/BUMED WASHINGTON DC
RHEFDIA/DIA WASHINGTON DC
RUEKJCS/SECDEF WASHDC
RHHMUNA/CDR USPACOM HONOLULU HI
RUEKJCS/CJCS WASHDC
RUEHBY/AMEMBASSY CANBERRA 9686
RUEHFR/AMEMBASSY PARIS 0906
RUEHRO/AMEMBASSY ROME 1896
RUEHIN/AIT TAIPEI 1823
RUEHHK/AMCONSUL HONG KONG 2153
RUEHBJ/AMEMBASSY BEIJING 3503
RUEHHM/AMCONSUL HO CHI MINH CITY 0089
RUEHGZ/AMCONSUL GUANGZHOU 0245
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UNCLAS SECTION 01 OF 03 JAKARTA 008259

SIPDIS

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SENSITIVE

DEPT FOR EAP/MLS, EAP/IET, A/MED AND S/ES-O
DEPT FOR G/AIAG/JLANGE AND RFENDRICK
DEPT FOR OES/FO, OES/EID, OES/PCI, OES/STC AND OES/IHA
DEPT PASS TO USDA/FAS/DLP/HWETZEL AND FAS/ICD/LAIDIG
DEPT ALSO PASS TO USDA/FAS/FAA/DYOUNG AND USDA/APHIS
DEPT ALSO PASS TO USAID/ANE/CLEMENTS AND GH/CARROLL
DEPT ALSO PASS TO HHS/WSTEIGER/ABHAT/MSTLOUIS AND HHS/NIH
PARIS FOR FAS/AG MINISTER COUNSELOR
CANBERRA FOR APHIS/DHANNAPEL
ROME FOR FAO
NSC FOR JMELINE
BANGKOK FOR RMO, CDC, USAID/RDM/A
USPACOM ALSO PASS TO J07

E.O. 12958: N/A
TAGS: TBIO AMED CASC EAGR AMGT PGOV ID KFLU
SUBJECT: INDONESIA – JULY 3 AVIAN INFLUENZA (AI) UPDATE

REF: A) Jakarta 7626 and previous

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¶1. (SBU) Summary: A Government of Indonesia (GOI) chaired AI
experts group concluded on June 23 that limited human-to-
human transmission took place during the May 2006 North
Sumatra cluster. However, the group noted that the
confinement of the human-to-human transmission to the
affected family and the absence of a mutation in the H5N1
virus means there was no danger to the wider population.
The group concluded that, based upon the findings from the
Medan family cluster, the global pandemic alert level should
remain at Phase 3. USAID signed a USD 350,000 pilot project
on June 26 that aims to strengthen Indonesia's capacity to
detect and respond to AI outbreaks in poultry in three high
priority provinces using cellular technology and the
internet. The WHO Influenza/H5N1 Reference Laboratory at
the University of Hong Kong and the Indonesian National
Institute of Health Research and Development (Litbangkes)
have confirmed AI infection in a deceased, 5-year old boy,
bringing the total number of confirmed H5N1 cases in
Indonesia to 54, with 42 deaths. End Summary.

WHO Technical Review and Expert Consultation

¶2. (U) Indonesia's National Committee for Avian Influenza
Control and Pandemic Influenza Preparedness (KOMNAS) and the
World Health Organization (WHO) co-hosted a AI "Technical
Review and International Expert Consultation Meeting" on
June 21-23 in Jakarta. AI experts from the WHO Geneva, the
CDC, NAMRU-2, USDA/APHIS, the UN Food and Agriculture
Organization (FAO), the World Bank, UNICEF, and the national
public health institutes from Japan and France participated.
KOMNAS Executive Director and Chair Bayu Krisnamurti and
Coordinating Minister for Peoples' Welfare Aburizal Bakrie
represented the GOI; neither Minister of Agriculture Anton
Apriyantono nor Minister of Health Dr. Fadilah Supari
participated.

¶3. (U) The general purpose of the meeting was to review the
current status of AI infection among human and animal
populations and to share findings with the GOI (i.e.,
KOMNAS) and donor agencies. Specific objectives included:

--Review the status of the H5N1 virus in humans and animals
in Indonesia.
--Develop recommendations on how to control AI infection in
both animals and humans.
--Review lessons learned for rapid response and containment.
--Develop an authoritative risk assessment of avian
influenza in Indonesia in both human and animals.

¶4. (SBU) Not surprisingly, the experts group concluded that
the H5N1 virus is endemic in avian populations in many areas
across Indonesia and that sporadic human cases are likely to
continue until the infection in poultry is reduced. The
experts added that the full extent of AI infection in
poultry remains unknown, and they recommended increased
surveillance and more responsive compensation following

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culls. The committee credited Indonesia with making
credible efforts to combat the disease in humans, but called
for a more forceful effort in investigating cases,
coordinating rapid responses and providing a clear public
message. The committee said it found no evidence that
viruses isolated from human samples in Indonesia had
reverted to become more easily transmissible.

¶5. (SBU) The committee noted, however, that epidemiological
and virological data from the North Sumatra family cluster
supports the possibility of limited human-to-human
transmission among infected blood relatives, a point
Ministry of Health officials vigorously debated. (Note:
This portion of the WHO's report on the North Sumatra
cluster was quickly leaked to the press and received wide
media attention, to the consternation of the GOI.) The
experts group concluded that the global pandemic alert level
had not advanced past phase 3, based upon the findings from
the Medan family cluster. However, a senior WHO
epidemiologist told us the WHO Geneva would review its
system of pandemic alerts to reduce ambiguity and confusion.

¶6. (SBU) Minister Bakrie thanked the committee for
acknowledging the positive responses of the GOI towards the
AI crisis. He also stated that in order to control
infection in Indonesia donors needed to use every means to
provide full funding as soon as possible for the
implementation of Indonesia's national AI and pandemic flu
plan.

USAID Pilot Project for AI Detection

¶7. (U) On June 26, USAID signed a USD 350,000, 9-month
agreement with Winrock/Voxiva to implement a pilot project
aimed at strengthening Indonesia's capacity to prepare for,
detect and respond to outbreaks of HPAI in poultry in three
high priority provinces. One of the three targeted
provinces is Banten, location of the Indonesia - Singapore -

U.S. trilateral project. Using cellular technology and the
internet, Winrock/Voxiva will assist Ministry of Agriculture
agents in collecting timely information on AI outbreaks
through existing mobile phone networks. If successful, this
activity could help accelerate early warning and reporting,
and potentially be applied to other aspects of AI
surveillance and response.

Human AI Case Profile

¶8. (SBU) Over the July 1-2 weekend, the WHO Influenza/H5N1
Reference Laboratory at the University of Hong Kong and the
Indonesian National Institute of Health Research and
Development (Litbangkes) confirmed AI infection in a 5-year
old boy who died on June 16 at Dr. Iskak Hospital in
Tulungagung, East Java. NAMRU-2 data indicates the
following AI-related case profile as of July 3:

-- Number of laboratory confirmed (positive PCR and/or

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serology) human AI cases: 54, of which 42 have been fatal
(case fatality rate of 78 percent).

-- Number of probable AI cases: 4, with 2 deaths (fatality
rate of 50 percent).

-- Number of cases awaiting verification by the US CDC: 1.

-- Number of possible AI cases under investigation (last 30
days): approximately 10.

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